

CLAIMS ONLY						Application Number 10750899	Filing Date	
						Applicant(s)		
						* May be used for additional claims or amendments		
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1					51		
2		1				52		
3		1				53		
4		1				54		
5		1				55		
6		1				56		
7						57		
8						58		
9						59		
10		1				60		
11	1					61		
12		1				62		
13		1				63		
14						64		
15						65		
16						66		
17						67		
18						68		
19						69		
20						70		
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28						78		
29						79		
30						80		
31						81		
32						82		
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36						86		
37						87		
38						88		
39						89		
40						90		
41						91		
42						92		
43						93		
44						94		
45						95		
46						96		
47						97		
48						98		
49						99		
50						100		
Total Indep	3					Total Indep		
Total Depend	10					Total Depend		
Total Claims	13					Total Claims		